

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

Fee

5. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. Type of Well

Oil
Well ☒Gas
Well ☐

Other

Single
Zone ☐Multiple
Zone ☐

2. Name of Operator

Amoco Production Company

3. Address of Operator

P.O. Box 17675

Salt Lake City, Utah 84117

4. Location of Well (Report location clearly and in accordance with any State requirements)

At surface

SE/4 NW/4 Section 29 663' FNL 1036' FWL (regular section)

At proposed prod. zone

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

8. Farm or Lease Name

Champlin 577 Amoco A

9. Well No.

10. Field and Pool, or Wildcat

Wildcat

11. Sec., T., R., M., or Blk.
and Survey or Area

Section 29 1N-3E

14. Distance in miles and direction from nearest town or post office*

Approximately 8.25 mi. Northwest of Kimball Junction, Utah

12. County or Parrish 13. State

Summit Co., Utah

15. Distance from proposed*
location to nearest
property or lease line, ft.
(Also to nearest drlg. line, if any)

16. No. of acres in lease

17. No. of acres assigned
to this well18. Distance from proposed location*
to nearest well, drilling, completed,
or applied for, on this lease, ft.

19. Proposed depth

4500'

20. Rotary or cable tools

Rotary to TD

21. Elevations (Show whether DF, RT, GR, etc.)

7057' top of Hub

22. Approx. date work will start*

23.

PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
11"	11 5/8"	24# K-55	500'	300 SX CL "G" w/CaCl ₂
7 7/8"	5 1/2"	17# K-55	4500'	CL "G" determine from logs

Propose to test Cretaceous for accumulation of hydrocarbons. Designate as
Stand-up Well.

See attachments

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

Signed

D. L. Davidson

Title District Admin. Supervisor

Date 8/23/79

(This space for Federal or State office use)

Permit No.

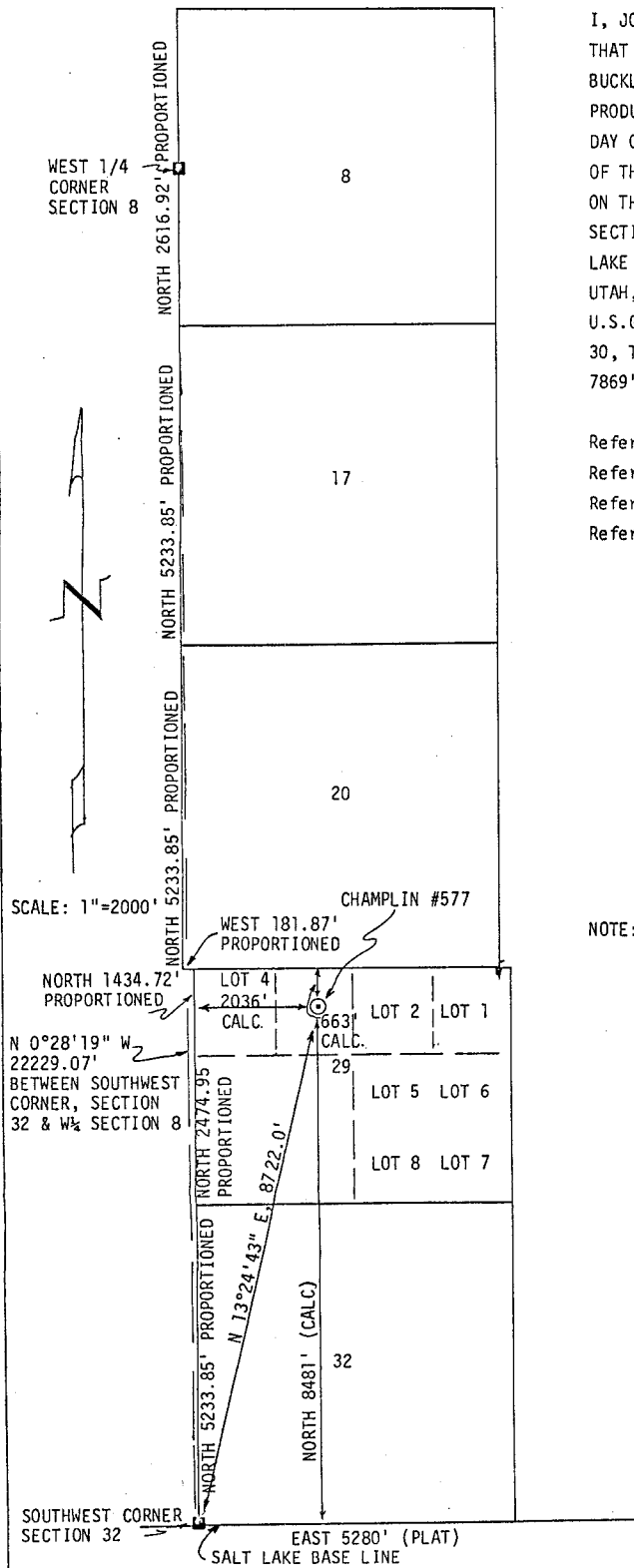
Approval Date

Approved by

Title

Date

Conditions of approval, if any:



I, JOHN A. PROFFIT OF EVANSTON, WYOMING CERTIFY THAT IN ACCORDANCE WITH A REQUEST FROM R.C. BUCKLEY OF EVANSTON, WYOMING FOR AMOCO PRODUCTION COMPANY I MADE A SURVEY ON THE 3RD DAY OF AUGUST, 1979 FOR LOCATION AND ELEVATION OF THE CHAMPLIN 577 AMOCO "A" WELL #1 AS SHOWN ON THE ABOVE MAP, THE WELLSITE IS IN LOT 3 OF SECTION 29, TOWNSHIP 1N, RANGE 3E OF THE SALT LAKE BASE AND MERIDIAN, SUMMIT COUNTY, STATE OF UTAH, ELEVATION IS 7057 FEET TOP OF HUB DATUM U.S.G.S. QUAD - MOUNTAIN DELL, UTAH, NE 1/4 SECTION 30, T1N, R3E, SLBM "BALD MOUNTAIN" ELEVATION 7869'.

Reference Point SOUTH 270' TOP OF PIN 7053.8'
 Reference Point EAST 250' TOP OF PIN 7125.7'
 Reference Point EAST 300' TOP OF PIN 7144.5'
 Reference Point WEST 250' TOP OF PIN 7140.7'

John A. Proffit 8/22/79
 JOHN A. PROFFIT, UTAH R.L.S. #2860



NOTE: AN INTENSIVE SEARCH OVER A PERIOD OF SEVERAL WEEKS WAS CONDUCTED TO LOCATE THE CORNERS OF SECTION 29 BUT TO NO AVAIL THE NEAREST CORNERS WHICH WERE LOCATED WAS THE WEST 1/4 CORNER OF SECTION 8 AND THE SOUTHWEST CORNER OF SECTION 32. THIS SURVEY IS BASED ON THESE TWO FOUND CORNERS AND IS SUBJECT TO THE ACCURACY OF THE ORIGINAL SURVEY.

MAP
 TO ACCOMPANY
 PERMIT TO DRILL
 CHAMPLIN 577 AMOCO "A" WELL #1
 LOCATED IN LOT 3 OF SECTION 29
 T1N, R3E OF THE SLBM
 SUMMIT COUNTY, UTAH

DATE: August 21, 1979
 JOB NO.: 79-10-5

Uinta Engineering & Surveying, Inc.
 Evanston, Wyoming

EXHIBIT A

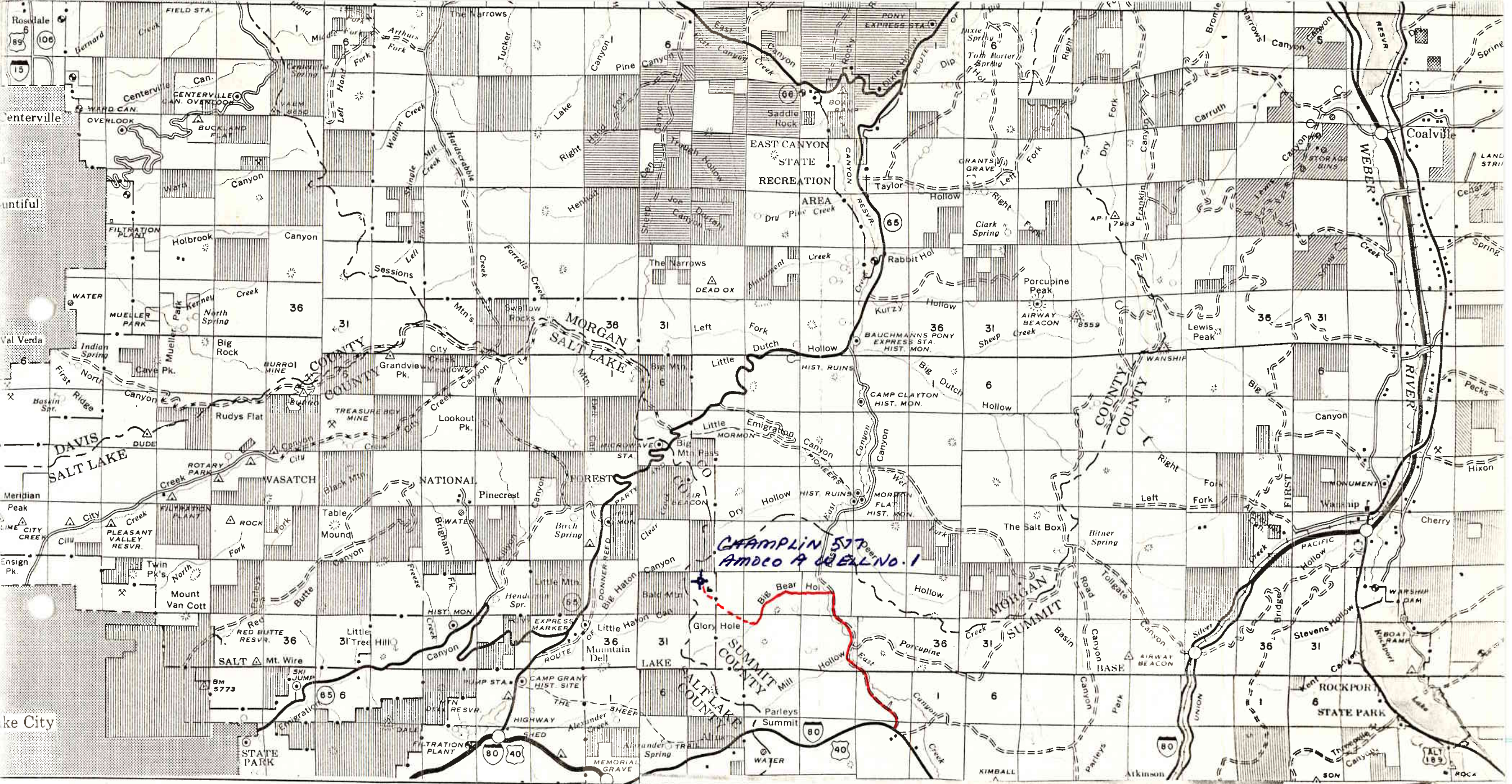
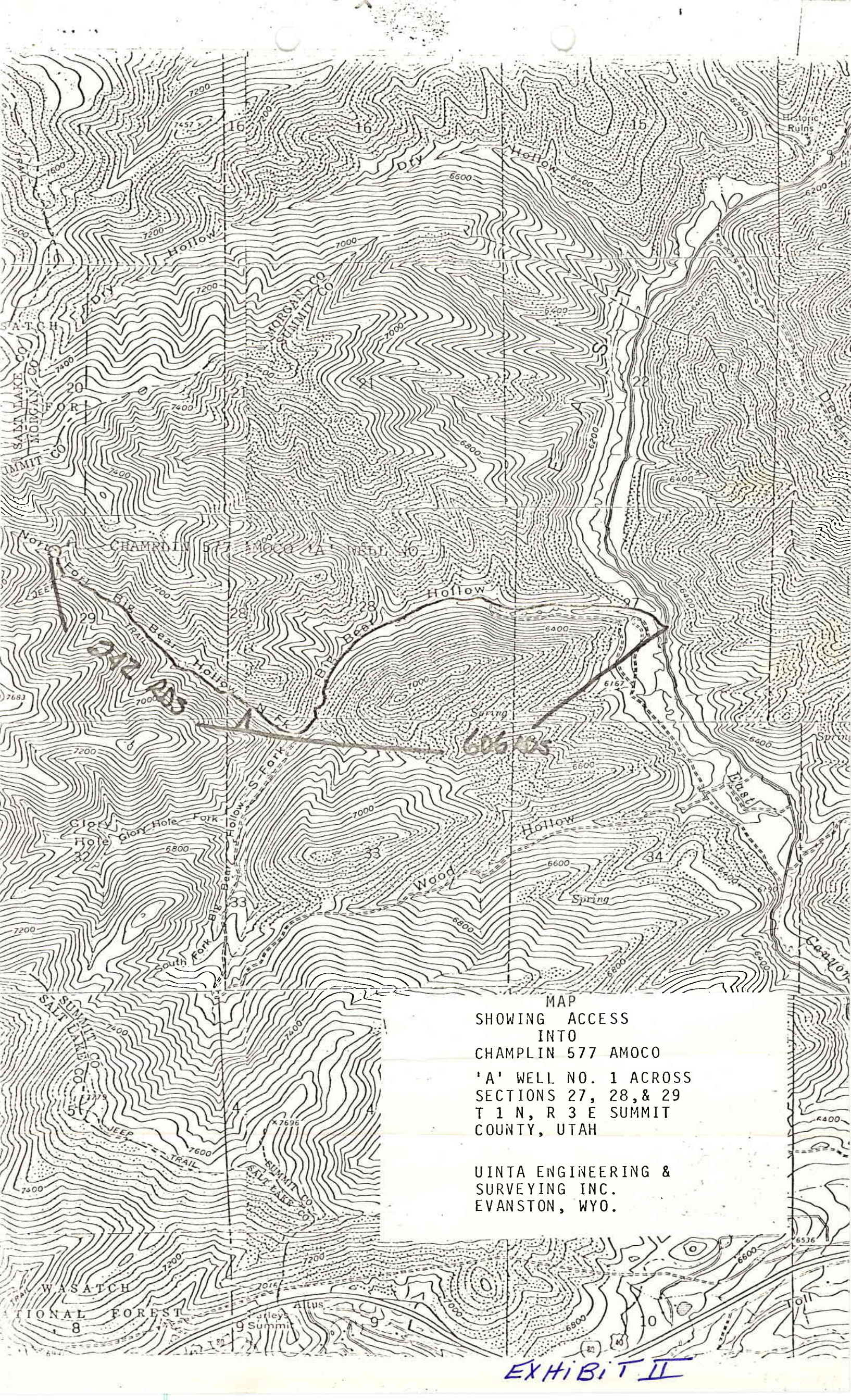


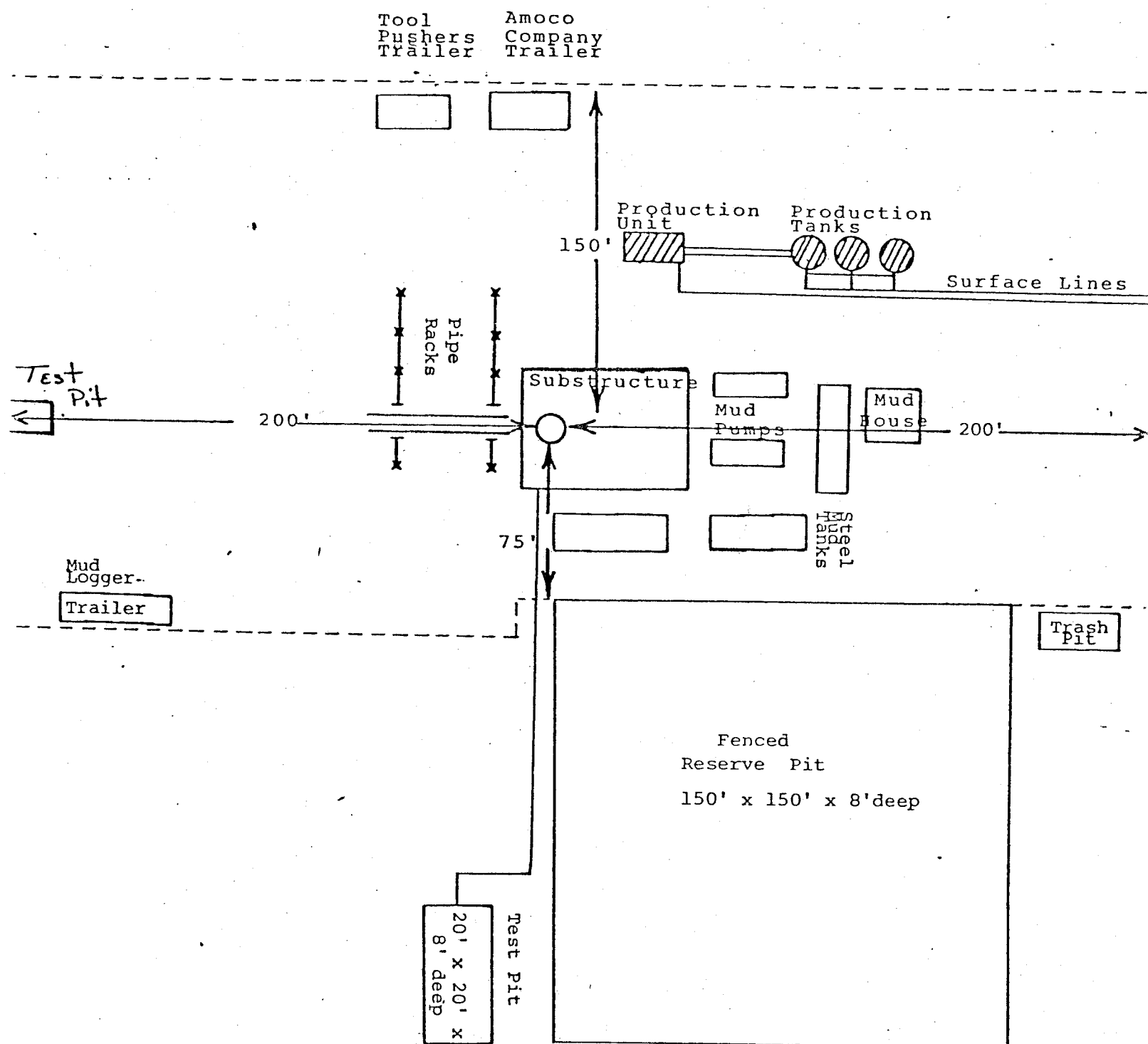
EXHIBIT I



MAP
SHOWING ACCESS
INTO
CHAMPLIN 577 AMOCO
'A' WELL NO. 1 ACROSS
SECTIONS 27, 28, & 29
T 1 N, R 3 E SUMMIT
COUNTY, UTAH

UINTA ENGINEERING &
SURVEYING INC.
EVANSTON, WYO.

EXHIBIT II



⊗ = Shows permanent production equipment to be installed after drilling rig has moved out.

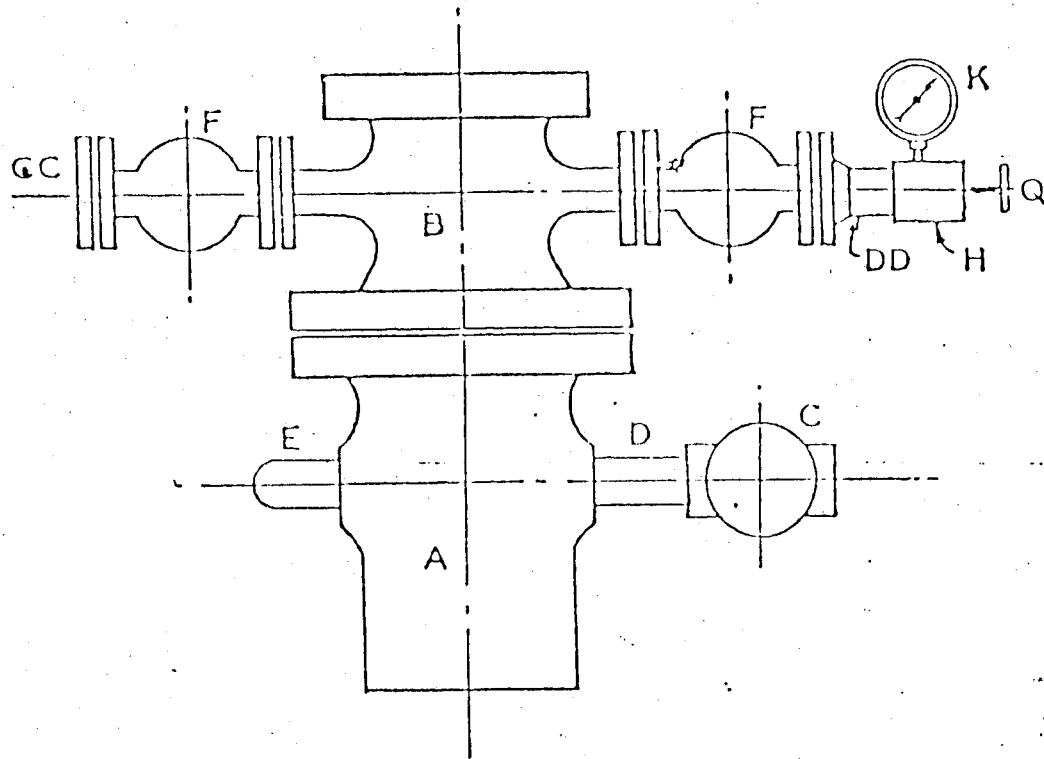
----- Dotted lines indicated perimeter of leveled location.

The fenced pit used for production will be covered if any fluid is present. The drilling and production pads will be constructed with dozers and graders using native material.

TYPICAL
LOCATION
LAYOUT

AMOCO PRODUCTION COMPANY
P. O. Box 17675
SALT LAKE CITY, UTAH 84117

EXHIBIT "D"

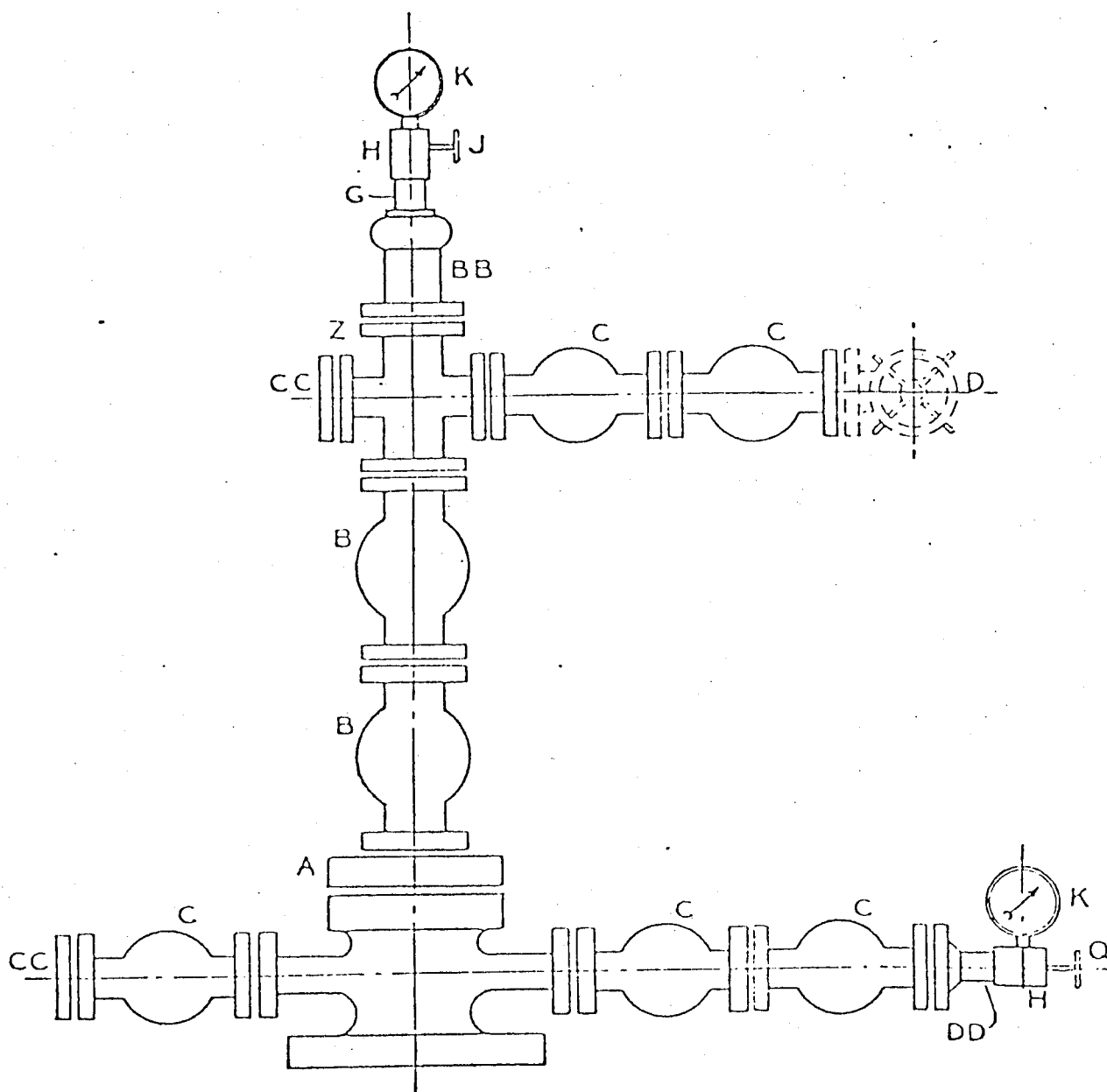


FOR 2,000# W.P. PRIMARY CASINGHEAD
AND 3,000# W.P. SECONDARY CASINGHEAD.

OR 3,000# W.P. PRIMARY CASINGHEAD
AND 3,000# W.P. SECONDARY CASINGHEAD.

OR 3,000# W.P. PRIMARY CASINGHEAD
AND 5,000# W.P. SECONDARY CASINGHEAD.

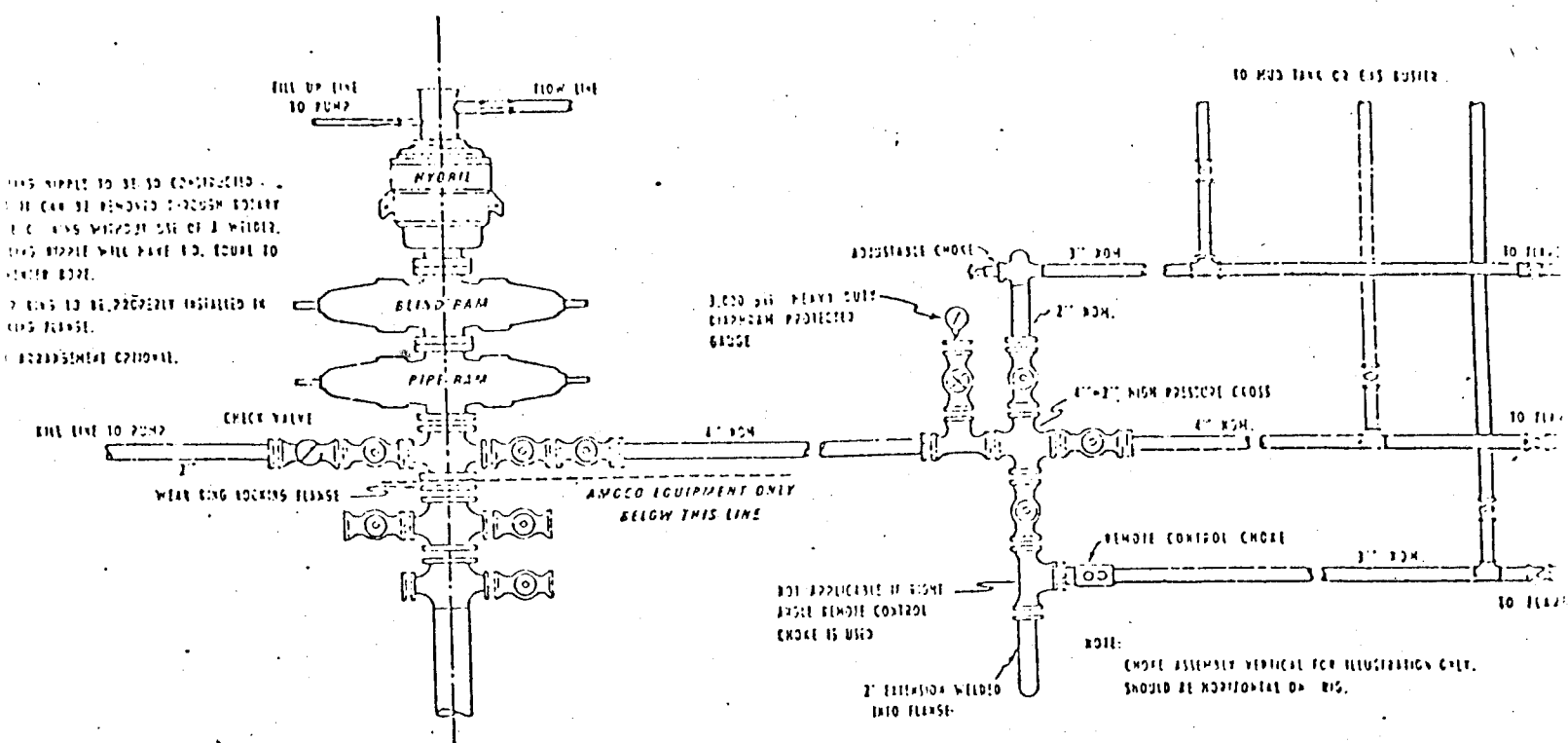
IF INTERMEDIATE STRING OF CASING NOT REQUIRED,
LOWER (PRIMARY) HEAD WILL BE ONLY CASINGHEAD USED.



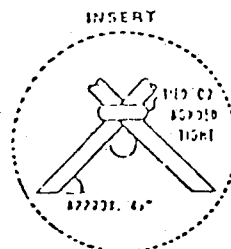
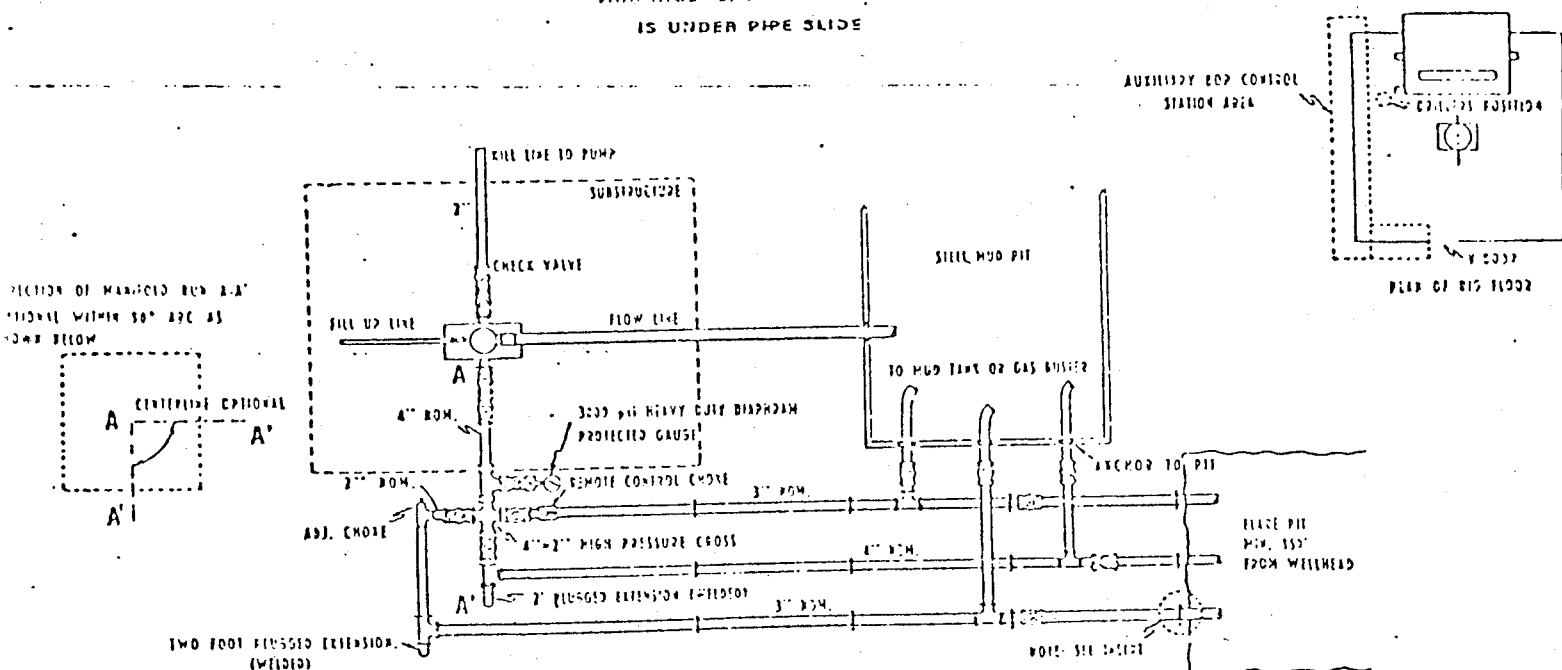
Amoco Production Company
 STANDARD BASIC WELL HEAD HOOK-UP
 5,000 P.S.I. W.P.

SCALE: NONE
 DR. W. J. H. AP. 10/5/52
 Dwg. No. A-8046

ARRANGEMENT IF MANIFOLD
IS ON SIDE OF HIC



ARRANGEMENT IF MANIFOLD
IS UNDER PIPE SLIDE



1. ALL OFF RECEIPTS, ALL INVOICES AND BILL MUST BE 3.000 gdt W.P. MINIMUM.
2. ALL INVOICES LISTING OF MATERIALS TO BE INVOICED, SPECIFIED OR VARIOUS QUANTITIES OF COMPOSITION FROM COUNTRY FORMS ARE INDISPENSIBLE CODE MAY HAVE SPECIFIED QUANTITIES.
3. ALL VALUES TO BE FULL COUNTRY, PLUS OR FULL PRICE TO FULL PRICE, AND 3.000 gdt W.P. MINIMUM.
4. SELLER VALUE MUST BE AVAILABLE OR BE FIXED AT ALL TIMES WITHIN 3.000 gdt W.P. MINIMUM, VALUE TO BE FULL PRICE 3.000 gdt W.P. MINIMUM.

- 3 THE TIMES DISSEMINATION OF CHARGE TO BE STOPPED IMMEDIATELY THERE BY AND MEANS OF CHARGE LETTER
- 4 EQUIPMENT T-2025A WHICH IS MOST PART SHALL BE IN THESE IS UNDER CONTROL OF THE CHARGE ROOM DURING T-2025A.
- 5 FIRST CASE TO REPORT.
- 6 INFORMATION WEAPONS AND HAND WEAPONS TO BE PROPERLY INSTALLED AND STORED AT ALL TIMES.
- 7 EQUIPMENT BLOWDOWN PREVENTED CORRECT TURNER TO BE LOCATED AS CLOSE TO EQUIPMENT POSITION AS POSSIBLE.

- 1) FROM ONE IDENTIFIED COUNTRY INFORMATION TO INCLUDE IN
COUNTRY RECOMMENDATIONS, AND TWO IDENTIFIED COUNTRIES OF
PRIMARY POWER OF EACH COUNTRY UNIT INFORMATION TO BE
LOCATED AT LEAST 15° FROM EACH OTHER, SIDE OF
THE
- 2) THE LOCATED AND REMOVED 10° OF THE COUNTRY IS
15° OF THE COUNTRY IS 10° OF THE COUNTRY.
- 3) REMOVE COUNTRY COUNTRY INFORMATION AND USE TO BE
STRENGTH AS POSSIBLE WITH THE COUNTRY SHOW MORE.

ATTACHMENT TO FORM 9-331 C

1. Geologic name of the surface formation: Cretaceous
2. Estimated tops of geological markers: Frontier Surface to 4500'
3. Estimated depths anticipated to encounter water, oil, gas or other mineral-bearing formations:

Water, Oil and Gas anticipated at
4. Casing Program - See Form 1 #23
5. Operators minimum specifications for pressure control equipment are explained on attached schematic diagram. Testing of such is to be performed daily and noted on the IADC Daily Drilling Report. After running surface casing and prior to drilling out, BOP and other pressure equipment will be tested to the full working pressure rating as shown on the attached diagram. Thereafter, the BOP will be checked daily for mechanical operations only and will be noted on the IADC Daily Drilling Report.

6. Mud Program:

0' - 800'	Spud	
800' - 4500'	LSND	8.6 - 9.0#/Gal. Minimum properties to keep hole stable and obtain good samples.

7. Auxiliary Equipment:

Kelly Cock: floor sub with a full opening valve. 3" choke manifold with remote control choke, 2500 PSI WP. 2 man mud logger.

8. Testing Program:

No special tests are planned.

Logging Program

DIL - GR	BSC - TD
BHC Sonic - GR	BSC - TD
FDC - CNL - GR	SFC - TD
HDT	BSC - TD
Check Shot Vel. Surv	

Coring Program

None Proposed

Stimulation Program

To be determined by District Office

Page 2

9. No abnormal pressure or temperature or potential hazards are anticipated. Anticipated bottom hole pressure - 6300 PSI. Casing head 9 5/8" 5000# WP. Tubing head, 10" x 5000# x 7 1/16" 10,000 #WP.
10. The anticipated starting date will be when approved. The duration of the operations will be approximately sixty days.

STATE OF UTAH
DIVISION OF OIL, GAS, AND MINING

**** FILE NOTATIONS ****

Date: August 27, 1979

Operator: Amoco Production Co.

Well No: Champlin 577 Amoco "A"-1

Location: Sec. 29 T. 1N R. 3E County: Summit

File Prepared: ☒

Entered on N.I.D.: ☒

Card Indexed: ☒

Completion Sheet: ☒

✓ API Number: 43-043-30113

CHECKED BY:

~~Administrative Assistant:~~ M.J. Mundy 9-12-79

Remarks:

Petroleum Engineer: J. M. Hansen, on Cas. on BOP.
mention difference in hole size 6' 11 5/8" Cas.

Remarks:

Director: _____

Remarks:

INCLUDE WITHIN APPROVAL LETTER:

1 +
note

Bond Required: ☐

Survey Plat Required: ☐

Order No. _____

Surface Casing Change ☒
to _____

Rule C-3(c), Topographic exception/company owns or controls acreage
within a 660' radius of proposed site ☐

O.K. Rule C-3 ☐

O.K. In _____ Unit

Other:

☒

Letter Written/Approved

See
plotted
on map

September 13, 1979

Amoco Production Company
P.O. Box 17675
Salt Lake City, Utah 84117

Re: Well No. Champlin 577 Amoco "A"-1
Sec. 29, T. 1N, R. 3E.,
Summit County, Utah

Dear Sir:

Insofar as this office is concerned, approval to drill the above referred to oil well is hereby granted in accordance with Rule C-3, General Rules and Regulations and Rules of Practice and Procedure. However, it was noted upon reviewing your APD, that some error had occurred in your proposed casing program (#23). Please correct this error and submit an amended APD or make the correction on a sundry notice.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately one of the following:

MICHAEL T. MINDER - Geological Engineer
Home: 876-3001
Office: 533-5771

FRANK M. HAMNER - Chief Petroleum Engineer
Home: 531-7827
Office: 533-5771

Enclosed please find Form OGC -8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling. Your cooperation in completing this form will be appreciated.

Amoco Production Company
September 13, 1979
Page 2

Further, it is requested that this Division be notified within 24 hours after drilling operations commence, and that the drilling contractor and rig number be identified.

The API number assigned to this well is 43-043-30113.

Sincerely,

DIVISION OF OIL, GAS AND MINING

Frank M. Hamner
Chief Petroleum Engineer

/b:tm

cc

ST. OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other in tions on
reve side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Fee	
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 17675, Salt Lake City, Utah 84117		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE/4 NW/4 Section 29, 663'FNL 2036'FWL (irregular section)		8. FARM OR LEASE NAME Champlin 577 Amoco A	
		9. WELL NO. 1	
		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 29 1N-3E	
14. PERMIT NO. 43-043-30113	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7057' Top of Hub	12. COUNTY OR PARISH Summit	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(Other) _____	Correct APD #23 <input checked="" type="checkbox"/>	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
11"	8 5/8"	24# K55	500'	300 sx C1"G" w/CaCL ₂
7 3/8"	5 1/2"	17# K55	4,500'	C1 "G" determine from logs

APPROVED BY THE DIVISION OF
OIL, GAS, AND MINING

DATE: Oct. 9, 1979

BY: Frank M. Hamner

18. I hereby certify Original Signed By and correct

SIGNED D. S. DAVIDSON

TITLE District Admin. Supervisor DATE 09/18/79

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____

DATE _____

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P & A		5. LEASE DESIGNATION AND SERIAL NO. Fee
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 17675 Salt Lake City, Utah 84117		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE/4 NW/4 Sec. 29 663' FNL & 2036' FWL (irregular section)		8. FARM OR LEASE NAME Champlin 577 Amoco "A"
14. PERMIT NO. 43-043-30113		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7057' top of hub 7181' KB		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29, T1N, R3E
		12. COUNTY OR PARISH Summit
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☒

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The subject well was plugged and abandoned on December 10, 1979, in the following manner:

TD: 4,500'

Casing: 8 5/8" set at 452'

Plugs: 200 sx set at 4500'
200 sx set at 4125'
60 sx plug set at 552', 100' in and 100' out of 8 5/8"
15 sx surface plug
Casing cut 5' below ground level and capped
Dry hole marker installed

(Verbal approval received by Bruce Shannon 12/10/79 at 4:00 p.m. from Mike Minder, Utah OGS&M)

APPROVED BY THE DIVISION OF
OIL, GAS, AND MINING

DATE: 1-16-80

BY: *[Signature]*

JAN 14 1980

18. I hereby certify that the foregoing is true and correct

SIGNED *[Signature]*

TITLE

Dist. Admin. Supervisor

DIVISION C
OIL, GAS & MINING

DATE

1/10/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

March 10, 1980

Amoco Production Co.
P.O. Box 17675
Salt Lake City, Utah

Re: Well No. Champlin 577 Amoco "A"
Sec. 29, T. 1N. R. 3E.
Summit County, Utah

Gentlemen:

This letter is to advise you that the Well Completion or Recompletion Report and Log for the above mentioned well is due and has not been filed with this office as required by our rules and regulations.

Please complete the enclosed Form OGC-3, in duplicate, and forward them to this office as soon as possible.

Thank you for your cooperation relative to the above.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING


JANICE TABISH
CLERK TYPIST

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

6

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> Other _____						5. LEASE DESIGNATION AND SERIAL NO. Fee	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 17675 Salt Lake City, UT 84117						8. FARM OR LEASE NAME Champlin 577 Amoco "A"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 663' FNL & 2036' FWL (irregular section) SE NW At top prod. interval reported below At total depth						9. WELL NO. #1	
14. PERMIT NO. 43-043-30113 DATE ISSUED 9/13/79						10. FIELD AND POOL, OR WILDCAT	
15. DATE SPUDDED 10/31/79 16. DATE T.D. REACHED 12/10/79 17. DATE COMPL. (Ready to prod.) 12/16/79 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7160' GR						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 29, T1N, R3E, SLBM	
20. TOTAL DEPTH, MD & TVD 4500'		21. PLUG, BACK T.D., MD & TVD --		22. IF MULTIPLE COMPL., HOW MANY* --		12. COUNTY OR PARISH Summit	
						13. STATE Utah	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None						19. ELEV. CASINGHEAD	
26. TYPE ELECTRIC AND OTHER LOGS RUN None						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
8 5/8"	24#	452'	12 1/4"	425 sx Class "G"			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
None					SIZE	DEPTH SET (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) None				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)			
				AMOUNT AND KIND OF MATERIAL USED			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in) P & A	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	(CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY MAR 21 1980	
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.							
SIGNED <i>Davidson</i>				TITLE Dist. Admin. Supervisor		DATE 3/19/80	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals' top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Frontier	3857'	
				Henefer	2350'	